

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	MRW	76331	
O.I.P.E. CLASSIFIER		49	6/7/99
FORMALITY REVIEW		Lele500	6-21-88

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 — (Through numeral)... Canceled  
 ÷ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
1	C	✓	1/2/99
2	✓	✓	1/2/99
3	✓	✓	1/2/99
4	✓	✓	1/2/99
5	✓	✓	1/2/99
6	✓	✓	1/2/99
7	✓	✓	1/2/99
8	✓	✓	1/2/99
9	✓	✓	1/2/99
10	✓	✓	1/2/99
11	✓	✓	1/2/99
12	✓	✓	1/2/99
13	✓	✓	1/2/99
14	✓	✓	1/2/99
15	✓	✓	1/2/99
16			
17	✓	✓	1/2/99
18			
19	✓	✓	1/2/99
20	✓	✓	1/2/99
21	✓	✓	1/2/99
22	✓	✓	1/2/99
23	✓	✓	1/2/99
24	✓	✓	1/2/99
25	✓	✓	1/2/99
26	✓	✓	1/2/99
27	✓	✓	1/2/99
28	✓	✓	1/2/99
29	✓	✓	1/2/99
30	✓	✓	1/2/99
31	✓	✓	1/2/99
32	✓	✓	1/2/99
33	✓	✓	1/2/99
34	✓	✓	1/2/99
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36	✓	✓	1/2/99
37	✓	✓	1/2/99
38	✓	✓	1/2/99
39	✓	✓	1/2/99
40	✓	✓	1/2/99
41	✓	✓	1/2/99
42	✓	✓	1/2/99
43	✓	✓	1/2/99
44	✓	✓	1/2/99
45	✓	✓	1/2/99
46	✓	✓	1/2/99
47	✓	✓	1/2/99
48	✓	✓	1/2/99
49	✓	✓	1/2/99
50	✓	✓	1/2/99

Claim	Final	Original	Date
51	✓	✓	1/2/99
52	✓	✓	1/2/99
53	✓	✓	1/2/99
54	✓	✓	1/2/99
55			
56	✓	✓	1/2/99
57	✓	✓	1/2/99
58	✓	✓	1/2/99
59	✓	✓	1/2/99
60	✓	✓	1/2/99
61	✓	✓	1/2/99
62	✓	✓	1/2/99
63	✓	✓	1/2/99
64	✓	✓	1/2/99
65	✓	✓	1/2/99
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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